2024 Rebel Judo Invitational

March 16, 2024

Owen County High School 2340 Hwy. 22 E, Owenton, KY 40359



Sanction:	USA Judo # Applied for				
Head Referee:	Mike Takata IJF International Referee				
Referee:	Referees interested in refereeing may contact Doris Beverly at <u>doris.beverly@owen.kyschools.us</u> or 502-550-9529.				
Eligibility:	Open to all participants.				
	All contestants must provide a valid USA Judo or ATJA card day of event.				
	NEW members may purchase a 45-Day (\$40.00) trial membership on-line at USA Judo: <u>https://www.usajudo.com/membership</u> .				
Register Online :	Starting February 1, 2024, online registration will begin at a cost of \$45 for the				
	first division, \$25 for second divisions. Registration and payment through				
	SMOOTHCOMP. Registration will end on Thursday, March 14, 2024, at 11:59				
	p.m. EST Online Registration Only				
Referees/Coaches Mee	eting: Saturday, March 16, 2024, 9:00 a.m. in OCHS library. All coaches and athletes are welcome.				
Self-Weigh-In:	Due to insurance guidelines, all weights must be verified the day of the event. When you register online, please put an accurate estimate of your weight in pounds . This weight will be used for pooling. On the day of the event, you must be within 2 pounds of that weight.				
Weight Verification:	Juniors 10 & under, Seniors, Veterans 8:00 a.m9:00 a.m. EST				
	Juniors 11 & up 9:00 a.m10:00 a.m. EST				
	Weigh-in will also be accepted Friday, March 15, 2024, 6:30 p.m 8:30 p.m. EST at venue.				
Competition:	Opening Ceremonies: 10:00 a.m. EST Seniors, Veterans and Juniors 10 & Under after Opening Ceremonies.				
	Juniors over 10 will not start before 12 p.m. EST.				
	Follow Smoothcomp online for estimated start time.				

The Center for SafeSport has developed the Minor Athlete Prevention Policies (MAAPP) which USA Judo has adapted to our own sport. The MAAPP is a collection of proactive and training policies comprised of two parts; Education & Training Policy that requires training for certain Adult Participants and the Required Prevention Policies, focused on limiting one-on-one interactions between Adult Participants and Minor Athletes to prevent abuse. The full MAAPP policy can be found at <u>www.usajudo.org</u>

Door Fee: SCORING:	\$5.00 True Double Elimination				
MATCH TIMES: RULES:	 Senior Advanced 4 minutes. All other divisions will be 3 minutes. Current International Judo Federation (IJF) rules, as modified by USA Judo, including: 1) Kansetsu Waza prohibited in all Junior and Senior Novice Divisions. 2) Shime Waza prohibited in all Junior Novice Divisions. 3) Shime Waza allowed in advanced divisions for age 13 years and up and Senior Divisions 				
TOURNEMENT DIRECTOR:	Doris Beverly (502) 550-9529 <u>doris.beverly@owen.kyschools.us</u>				
AWARDS:	Individual Medals: 1st, 2nd, 3rd Team Trophies: 1st, 2nd, 3rd (Total points)				
CONCESSIONS:	Food and drinks will be available on site.				

All competitors must bring their own white and blue belts. First called competitor must wear white gi. Second competitor should wear blue gi. However, white gi w/blue belt is allowed.

The Tournament Director reserves the right to make any changes that are in the best interest of the contestants to achieve fairness and competition.

DIVISIONS

Any Junior Athlete who has placed at a national event in the advance division may not compete in the Novice division.

Novice (Yonkyu and below) Light/ Middle/ Heavy
Brown Belt Light/ Middle/ Heavy
Black Belt 60kg/66kg/73kg/81kg/90kg/100kg/+100kg
Novice (Yonkyu and below) Light/ Middle/ Heavy
Brown Belt-Light/ Middle/ Heavy
Black Belt- Light/ Middle/ Heavy
Men's Novice Light /Middle/ Heavy
Men's Advanced-30-44, 45+ Light/ Middle/ Heavy
Women's Light /Middle/ Heavy

Hotels are approx. 30 minutes from the event if coming from Cincinnati, Louisville, Lexington.

Ramada Inn (I-71 Exit 57) 525 Dale Dr. Sparta, KY 41086 1-859-904-1460 Breakfast Included Indoor Pool Hampton Inn (I-75 Exit 159) 1200 Cull Rd. Dry Ridge, KY 41035 859-823-7111 Hot Breakfast Included Indoor Pool

Capital Plaza Hotel (I-64) 405 Wilkerson Boulevard Frankfort, KY 40601 502-227-5100 Continental Breakfast Indoor Pool

Official Use: M/F	Age W	eight	Rank	Div	#Div				
202	24 Rebe	l Judo	Invita	tional					
Entry Form (one form for each division)									
Please Print									
Contestants Name									
Club Representing									
Age on March 16, 2024 Dat	e of Birth	MaleF	emale Belt	t ColorV	Weight (lbs.)				
Divisions (check one): A separate form must be completed for each division entered.									
If this is a second division, please check \Box Up in age \Box Up to advanced									
□ Junior Boys Novice □Under 4 □ 5-6 □ 7-8 □ 9-10 □ 11-12 □ 13-14 □ 15-16									
☐ Junior Boys Advanced	□ Junior Boys Advanced □ 5-6 □ 7-8 □ 9-10 □ 1-12 □ 13-14 □ 15-16								
□ Junior Girls Novice □ Under 4 □ 5-6 □ 7-8 □ 9-10 □ 11-12 □ 13-14 □ 15-16									
☐ Junior Girls Advanced ☐ 5-6 ☐ 7-8 ☐ 9-10 ☐ 11-12 ☐ 13-14 ☐ 15-16									
Senior Men Novice		Senior Wo	omen Novice						
Senior Men Brown		Senior Women Brown							
Senior Men Black		Senior Women Black							
Men's Veterans Novice Women's Veterans									
Men's Veterans Advanced 30-44 Men's Veterans Advanced 45+									
HOME ADDRESS									
CITY		_STATE	ZIP	PHONE					
E-MAIL ADDRESS									
USA Judo (ONLY) # EXPIRATION DATE									

Certificate Regarding Non-Black Belt Contestants

I, ______, a Judo Instructor, who holds the Judo rank of Shodan or higher, which has been awarded under the auspices of the United States Judo Federation, United States Judo Association, or United States Judo, Inc., hereby certifies that the above Contestant, although not having been awarded the Judo rank of Shodan or higher, is of sufficient aptitude and skill in Judo to compete in the above described event.

Signature of Judo Instructor

THE WARNING WAIVER AND RELEASE OF LIABILITY AND AGREEMENT TO PARTICIPATE MUST BE SIGNED AND RETURNED WITH THE ENTRY FORM.

Please Sign

WARNING!

WAIVER AND RELEASE OF LIABILITY AND AGREEMENT TO PARTICIPATE

In consideration of being permitted to participate in any way, including travel to and from the **2024 Rebel Judo Invitational** and related events and activities of USA Judo, Owen County Judo Team, Owen County High School, Owen County Board of Education.

1. Acknowledge that I am familiar with the sport of Judo and understand the rules governing the sport of Judo.

2. Agree that prior to participating, I will inspect the mats, equipment, facilities, competition pools or divisions and the elimination or scoring system to be used, and if I believe anything is unsafe or beyond my capability, I will immediately advise my coach, supervisor, and/or a tournament official of such conditions and refuse to participate.

3. Acknowledge and fully understand that I will be engaging in a contact sport that might result in serious injury, including permanent disability, Traumatic Brain Injury (TBI) or death, and severe social and economic losses due to not only my own actions, inactions, or negligence, but also to the actions, inactions, or negligence of others, the rules of the sport of Judo, or conditions of the premises or of any equipment used. Further, I acknowledge that there may be other risks not known to me or not reasonably foreseeable at this time.

4. Knowing the risks involved in the sport of Judo, I assume all such risks and accept personal responsibility for the damages following such injury, permanent disability, or death.

5. Release, waive, discharge and covenant not to sue the United States Judo, Inc. (USA Judo), Owen County Judo Team, Owen County High School, Owen County Schools, together with their affiliated clubs, their respective administrators, directors, agents, coaches and other employees or volunteers of the organization, event officials, medical personnel, other participants, their parents, guardians, supervisors and coaches, sponsoring agencies, sponsors, advertisers, and if applicable owners, lessors, and lessees of premises used to conduct the event, all of whom are hereinafter referred to as "releasee", from any and all claims, demands, losses, or damages on account of injury, including permanent disability and death and damage to property, caused or alleged to be caused in whole or part by the negligence of the releasee or otherwise to the fullest extent permitted by law.

I HAVE READ THE ABOVE WARNING, WAIVER AND RELEASE, UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND KNOWING THIS, SIGN IT VOLUNTARILY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE. I AGREE TO PARTICIPATE KNOWING THE RISK AND CONDITIONS INVOLVED AND DO SO ENTIRELY OF MY OWN FREE WILL. I AFFIRM THAT I AM AT LEAST 18 YEARS OF AGE, OR, IF I AM UNDER 18 YEARS OF AGE, I HAVE OBTAINED THE REQUIRED CONSENT OF MY PARENT/GUARDIAN AS EVIDENCED BY THEIR SIGNATURE BELOW. I INTEND THIS TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THAT THE BALANCE, NOTWITHSTANDING SHALL CONTINUE IN FULL FORCE AND EFFECT.

Participant's Printed Name

Participant's Signature

Date

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release, as provided above, of all the Releasees, and, for myself, my heirs, assigns, and next of kin I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, even if arising from their negligence, to the fullest extent permitted by law. I have instructed the minor participant as to the above warnings and conditions and their ramifications.

Parent/Guardian's Printed Name

Parent/Guardian's Signature

Date